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CONFIRMATION NO. 5888

SERIAL NUMBER 10/650,112	FILING DATE 08/26/2003  RULE	CLASS 435	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. CWRU-P01-044
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## APPLICANTS

Sanford D. Markowitz, Pepper Pike, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/274,177 10/18/2002  
 which is a CIP of 10/229,345 08/26/2002  
 This application 10/650,112  
 claims benefit of 60/406,296 08/27/2002

SR

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

SR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 11/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 48	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

28120  
 FISH & NEAVE IP GROUP  
 ROPES & GRAY LLP  
 ONE INTERNATIONAL PLACE  
 BOSTON, MA  
 02110-2624

## TITLE

Methods for treating patients and identifying therapeutics

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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